PTO/SB/08A (10-01)

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Substitute for form 1449A/PTO				Application Number	10/662,253	
				Filing Date	September 15, 2003	
INFO	RMATION DIS	CLO	SURE	First Named Inventor	Roman	
STAT	STATEMENT BY APPLICANT			Art Unit	2835	
				Examiner Name		
(use as many sheets as necessary)					·	
Sheet	1	of	1	Attorney Docket Number	020503CON	

			S. PATENT DO	CUMENTS	
Examiner Initials*	Cite No *	Document Number Number - Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentec or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
(0)		6,621,700	09-16-2003	Roman et al.	
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		FOREIGN F	PATENT DOC	UMENTS		•
		Foreign Patent Document			Pages, Columns, Unes,	
Examiner Initials*	Cite No.'	Country Code ³ -Number ⁴ -Kind Code ⁵ (If known)	Publication Date MIM-OD-YYYY	Name of Patentee or Applicant of Cited Document	Where Relevant Passages or Relevant Figures Appear	™
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	1	OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS	
Examiner Initials*	Cile No.1	todude name of the author (in CAPITAL LETTERS), title of the enticle (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T2

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muais	140.	Number - Kind Code ² (if known)		, , , , , , , , , , , , , , , , , , , ,	Figures Appear
A		US-3,811,958	05-21-1974	Maurer	
		US-5,101,320	03-31-1992	Bhargava et al.	
		US-5,170,336	12-08-1992	Getter et al.	
		US-5,670,936	09-23-1997	Estes et al.	
		US-5,680,294	10-21-1997	Stora et al.	
		US-5,945,746	08-31-1999	Tracewell et al.	
		US-6,046,921	04-04-2000	Tracewell et al.	
		US-6,418,015	07-09-2002	Kociecki, John	
1,		US-6,493,227	12-10-2002	Nielsen et al.	
Y	ļ	US-6,515,858	02-04-2003	Rodriguez et al.	
	1				
	 				

		FOREIGN F	PATENT DOC	JMENTS		
	l	Foreign Patent Document		Name of Patentee or	Pages, Columns, Lines,	1
Examiner Initials*	Cite No.1	Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages or Relevant Figures Appear	τ°
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